Attachment 5 FISCAL MANAGEMENT 2 SFY 2003-2004 Semi-Annual

Area Authority/County Programs Substance Abuse Prevention and Treatment Block Grant Compliance

Report

for Division Performance Agreement

Mid-Year Report:

Report Period: July 1, 2003 through December 31, 2003

Due Date: January 20, 2004

Year-End Report:

Report Period: January 1, 2004 through June 30, 2004

Due Date: July 20, 2004

CPM

Division of Mental Health, Developmental Disabilities, and Substance Abuse Services

North Carolina Department of Health and Human Services

Revision: August 2003

Attachment 5 FISCAL MANAGEMENT 2

SFY 2003-2004 AREA AUTHORITY/COUNTY PROGRAM SAPTBG Compliance Report Format

- Section I: Report of SAPTBG 20% Set-Aside Fund Expenditures and Hours of Services for SA Primary Prevention Programs
 - A. **SAPTBG Expenditures:** Primary Prevention Expenditures by Program Strategy
 - B. **Other Funds:** All Other Substance Abuse Primary Prevention Funds by Source
 - C. **Hours of Services:** Area Authority/County Program SA Primary Prevention Hours of Services Provided to Recipients by Age Group/Primary High Risk Factor
- Section II: SAPTBG Primary Prevention Strategies and Activities Checklist
- Section III: SAPTBG Primary Prevention Program Staff and Written Program Plan (APSM 30-1, T10: 14 V .4200 and .6900)
 - A1. **Signature**: Signature of Designated Area Authority/County Program Director of SA Primary Prevention Services
 - A. Staff: SAPTBG Primary Prevention Program Staff by Name, Position Title, FTE, and Prevention Certification Status
 - B1. **Plan Summary:** Description of Written Program Plan for Consultation and Education Services
 - B2. Plan Copy: Copy of Written Program Plan for Consultation and Education Services
- Section IV: SAPTBG Activities for Reducing Youth Access to Tobacco Products Initiative (Synar Amendment)
 - A1. **Signature:** Signature of Designated Area Authority/County Program Liaison for Reducing Youth Access to Tobacco Products
 - A2. Synar Activities: SAPTBG Activities Completed by Area Authority/County Program in SFY 2003-2004 Related to Synar Amendment
- Section V: Priority Admission Preference for Pregnant Injecting Drug Users, Pregnant Women and Injecting Drug Users
 - A. **Policies:** Description of Policies and Practices Assuring Admission Preference
 - B. **Publicity Efforts:** Description of policies publicizing admission practices
- Section VI: Universal TB Screening, Testing, Referral & Case Management Services, and Health Department MOA
 - A. **TB Screening:** Description of Program Policies and Practices Assuring Universal TB Screening
 - B. TB Services: Description of Services for Individuals at High Risk for Contracting TB
 - C. **TB MOA:** Copy of Memorandum of Agreement between the Area Authority/County Program and the Local Health Department Pertaining to TB Services.
- Section VII: Communicable Disease Risk Services for Injecting Drug Users & Those Clients Assessed at Risk for TB or HIV
 - A. Client Admission and Interim Services: Description of policies and practices that assure client admission within 14 days of request for services, or if at capacity, within 120 days of request for services, and provision of interim services within 48 hours of request for services.
 - B. **HIV Services:** Description of HIV referral, pre-test counseling, testing, and post-test counseling services.
 - C. HIV MOA: Copy of Memorandum of Agreement between the Area Authority/County Program and the Local Health Department Pertaining to HIV Services.
- **Section VIII: Signatures of Personnel Responsible for Compliance**
 - A1. Area Director/CEO Signature A2. Finance Officer Signature A3. Adult SA Director Signature A4. Child and Adolescent SA Director

Attachment 5 FISCAL MANAGEMENT 2

SFY 2003-2004 Semi-Annual Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Compliance Report

Check (✓) One applicable 6 Month Report Period Below:	Area Authority/County Program:
Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date:	1/20/2004 Year-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/20

Section I: Report of SAPTBG 20% Set-Aside Fund Expenditures and Hours of Services for Substance Abuse Primary Prevention Programs

SFY 2003-2004 Memorandum of Agreement between the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services and the Area Authority/County Program:

Each area authority/county program shall designate and expend no less than 20% (twenty percent) of the area authority/county program's total Substance Abuse Prevention and Treatment (SAPTBG) funding for the provision of substance abuse primary prevention services, and shall maintain adequate fiscal and programmatic records of such expenditures and earnings for (SAPTBG) reporting purposes in accordance with the requirements of the SAPTBG as highlighted in the Summary of Significant Federal Funding Requirements. *

A. AREA AUTHORITY/COUNTY PROGRAM SUBSTANCE ABUSE PRIMARY PREVENTION PROGRAM SET-ASIDE REQUIRED ANNUAL MINIMUM EXPENDITURE AMOUNT ESTABLISHED BY SUBSTANCE ABUSE SERVICES STATE OFFICE FOR SFY 2003-2004

\$

- B. SAPTBG PRIMARY PREVENTION <u>EXPENDITURES</u> BY PROGRAM STRATEGY: <u>List only SAPTBG actual auditable funding expenditures</u> for applicable period in SFY 2002-2003 for SA Primary Prevention Programs by program strategy. <u>Pioneer Funding System Value of Services or Earnings are not considered to be acceptable by the federal government as evidence of expenditure of SAPTBG funds. See Page 7 for definition and strategies from the SAPTBG.</u>
- B1. First Six Months Report of Expenditures to be Completed at Mid-Year for Period of July 1, 2003 December 31, 2003:

	(1a) Information Dissemination	(2a) Education	(3a) Alternatives	(4a) Problem Identification and Referral	(5a) Community- Based Process	(6a) Environmental	(7a) Combined Total \$
Child SA	\$	\$	\$	\$	\$	\$	\$
Adult SA	\$	\$	\$	\$	\$	\$	\$
Total SA	\$	\$	\$	\$	\$	\$	\$

B2. Second Six Months Report of Expenditures to be Completed at Year-End for Period of January 1, 2004 – June 30, 2004:

	(1a) (2a) Information Education Dissemination		(3a) Alternatives	(4a) Problem Identification and Referral	(5a) Community- Based Process	(6a) Environmental	(7a) Combined Total \$
Child SA	\$	\$	\$	\$	\$	\$	\$
Adult SA	\$	\$	\$	\$	\$	\$	\$
Total SA	\$	\$	\$	\$	\$	\$	\$

DMH/DD/SAS – SAS Section – Revised as of July 2002

Check (✓) One applicable 6 Month Report Period Below:	Area Authority/County Progr	ram:
Mid-Year Report: July 1, 2003 through December 31, 2003-	Due Date: 1/20/2004	Year-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/2004

B3. Combined First and Second Six Months Reports of Expenditures to be Completed at Year-End for Period of July 1, 2003 – June 30, 2004:

	(1a) Information Dissemination			(4a) Problem Identification and Referral	(5a) Community- Based Process	(6a) Environmental	(7a) Combined Total \$
Child SA	\$	\$	\$	\$	\$	\$	\$
Adult SA	\$	\$	\$	\$	\$	\$	\$
Total SA	\$	\$	\$	\$	\$	\$	\$

B4. [FOR REPORT DUE IN JULY ONLY]

If applicable, please explain any discrepancy in actual expenditure amounts between:

A. Area Authority/County Program Substance Abuse Primary Prevention Program Set-Aside Required Annual Expenditure Amount Established by the Substance Abuse Services State Office and

B3. Combined First and Second Six Months Reports of Expenditures to be Completed at Year-End for Period of July 1, 2003 – June 30, 2004.

Revised as of July 2002 DMH/DD/SAS - SAS Section -

Attachment 5 FISCAL MANAGEMENT 2

SFY 2003-2004 Semi-Annual Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Compliance Report

Check (✓)	One applicable 6 Month Report Period Below:	Area Authority/County Prog	ram:		
	_Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date:	1/20/2004	Year-End Report:	Jan. 1, 2004 through June 30, 200	4 - Due Date: 7/20/200

A. ALL OTHER SA PP ANNUAL (12 MO.) GRANT FUNDING BY SOURCE: List all other Area Authority/County Program funds in SFY 2003-2004 for SA PP by source.

(1b) DHHS/Governor's Substance Abuse And Violence Primary Prevention Project Grant(s)	(2b) DPI/LEA Grant(s) From Safe and Drug-Free Schools and Communities Act	(3b) Community-Based Alternatives (CBA) or Other OJJ Grant(s) for SA Primary Prevention Programs	(4b) Center for Substance Abuse Prevention State Incentive Grant (SIG) or Other AREA AUTHORITY/COUN TY PROGRAMS Grant	(5b) Other Federal, State, Local, Private or Foundation Funds (Describe):	(6b) Other (Describe):	(7b) Combined Total \$
\$	\$	\$	\$	\$	\$	\$

A. SA PRIMARY PREVENTION HOURS OF SERVICES PROVIDED TO RECIPIENTS BY AGE GROUP/PRIMARY HIGH RISK FACTOR:

Comprehensive primary prevention programs should give priority to target population sub-groups that are at risk of developing a pattern of substance abuse. Programs should include activities and services provided in a variety of settings, that address specific risk factors, and that may be broken down by age, race/ethnicity, gender, and other characteristics of the population being served. (Summary of Significant Federal Funding Requirements, SAMSHA, 45 CFR Part 96, March 31, 1993).

B1. First Six Months Report of Hours to be Completed at Mid-Year for Period of July 1, 2003 – December 31, 2003:

List total number of hours from actual Pioneer Funding System standardized units documented in non-treatment services provided by area authority/county program staff through Substance Abuse Primary Prevention Programs to individual and group recipients for applicable period in SFY 2002-2003 by Recipient Age and ONE Primary High Risk Factor.

RECI- PIENT PRI-	(0c) R000	(1c) R001	(2c) R002	(3c) R003	(4c) R004	(5c) R005	(6c) R006	(7c) R007	(8c) R008	(9c) R009	(10c) R010	(11c) R011	(12c) R012	(13c) R013	(14c) R014	(15c) R015	(16c)
MARY HIGH RISK FACTOR	General Group with No Identifi ed Risk Factor	School Drop- Out (<18)	Repeated ed Failure in School (<18)	Pregna nt: Teen or Woman	Econom ically Disad- van- taged	Child of a Drug or Alcohol Abuser (<18)	Victim of Physical, Sexual, or Psychological Abuse (<18)	Has Commit -ted a Violent Or Delin- quent Act (<18)	Has Had Past Mental Health Prob- lems	Has Attem- pted Suicide in the Past	Has Had Long- term Physical Pain Due to Injury	Is a Juvenil e within a Detention Facility within the State (<18)	Other (Des- cribe):	Is Physi- cally Dis- abled	Legally Uses Alcohol or Pre- scribed Drugs without Evi- dence of Abuse	Is a Home- less and/or Run- away Youth (<18)	Combined Total Hours of Services
Child SA																	
Adult SA																	
Total SA														_			

DMH/DD/SAS – SAS Section – Revised as of July 2002

Attachment 5 FISCAL MANAGEMENT 2 SFY 2003-2004 Semi-Annual Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Compliance Report

Check (✓) One applicable 6 Month Report Period Below:	Area Authority/County Program:
Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date:	e: 1/20/2004Year-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/2004

B2. Second Six Months Report of Hours to be completed at Year-End for Period of January 1, 2004 – June 30, 2004:
List total number of hours from actual Pioneer Funding System standardized units documented in non-treatment services provided by area authority/county program staff through Substance Abuse Primary Prevention Programs to individual and group recipients for applicable period in SFY 2003-2004 by Recipient Age and ONE Primary High Risk Factor.

RECI- PIENT PRI- MARY HIGH RISK FACTOR	(0c) R000 General Group with No Identi- fied Risk Factor	(1c) R001 School Drop- Out (<18)	(2c) R002 Repeated Failure in School (<18)	(3c) R003 Preg- nant: Teen or Woman	(4c) R004 Econom -ically Disad- van- taged	(5c) R005 Child of a Drug or Alcohol Abuser (<18)	(6c) R006 Victim of Physical, Sexual, or Psychological Abuse (<18)	(7c) R007 Has Commit -ted a Violent Or Delin- quent Act (<18)	(8c) R008 Has Had Past Mental Health Prob- lems	(9c) R009 Has At- tempted Suicide in the Past	(10c) R010 Has Had Long- term Physical Pain Due to Injury	(11c) R011 Is a Juvenil e within a Detention Facility within the State (<18)	(12c) R012 Other (Des- cribe):	(13c) R013 Is Physi- cally Dis- abled	(14c) R014 Legally Uses Alcohol or Prescribed Drugs without Evidence of Abuse	(15c) R015 Is a Home- less and/or Run- away Youth (<18)	Combined Total Hours of Services
Child SA																	
Adult SA																	
Total SA	_	_	_	_		_	_	_	_	_	_	_	_	_		_	

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CEV 2002 2004 C.

	SF Y 2005-2004 Semi-Annual Substance Abuse Prevention	ana Treatment Block Grant (SAPTBG) Compliance Report	
Ch	eck (✓) One applicable 6 Month Report Period Below: Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date: 1/20/2004	ority/County Program:Year-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/20	004
Sec	ction II: Area Authority/County Program SAPTBG Primary Prevention Strateg	es and Activities Checklist	
Sub cou cou reg	PRIMARY PREVENTION PROGRAM DEFINITION AND STRATEGIES FOr Destance Abuse Primary Prevention Programs are those directed at individuals who do inseling individuals on such abuse and providing for designated non-treatment activiting instead as part of the Block Grant's 20% Prevention Set-Aside may not be counted toward ulations, nor may primary prevention services include any activity designed to determine the period through SFY 2003-2004 actual SAPTBG expenditures.	R PURPOSES OF SA PREVENTION AND TREATMENT BLOCK GRANT not require treatment for substance abuse. Such programs are aimed at educating and set to reduce the risk of such abuse. Early intervention activities which were previousleds the required 20% Primary Prevention Program Set-Aside in the new Block Grant in if a person is in need of treatment. Check () all activities and methods supported	y l foi
(1)	Information Dissemination: This strategy provides awareness and knowledge of the nature and extent of alcohol, tobacco, and drug use, abuse and addiction and their effects on individuals, families and communities. It also provides knowledge and awareness of available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two. Examples include: Clearinghouse/information resource center(s);	can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment. Examples include: Marketing Only of Employee Assistance Programs; (Division of MH/DD/SAS policy prohibits the earning of federal or state funds through the Pioneer Funding System to support EA Programs) Student assistance programs; Other (Specify): Driving while under the influence/while intoxicated education programs; (Division of MH/DD/SAS policy prohibits the earning of federal or state funds through the Pioneer Funding System to support DWI Assessments or ADETS Programs)) gh
(2)	Education: This strategy involves two-way communication and is distinguished from the Information Dissemination strategy by the fact that interaction between the educator/facilitator and the participants is the basis of its activities. Activities under this strategy aim to affect critical life and social skills, including decision-making, refusal skills, critical analysis (e.g. of media messages) and systematic judgment abilities. Examples include: Ongoing classroom and/or small group sessions (all ages); Parenting and family management classes; Mentors; Peer leader/helper programs; Education programs for youth groups; Children of substance abusers groups; Preschool ATOD prevention programs; and Other (Specify):	 (5) Community-Based Process: This strategy aims to enhance the ability of the community to mose effectively provide prevention and treatment services for alcohol, tobacco and other drug abuse disorders. Activities in this strategy include organizing, planning, enhancing efficiency and effectiveness of services implementation, inter-agency collaboration, coalition building and networking. Examples include:	
(3)	Alternatives: This strategy provides for the participation of the target populations in activities that exclude alcohol, tobacco, and other drug use. The assumption is that constructive and healthy activities offset the attraction to, or otherwise meet the needs usually filled by alcohol, tobacco and other drugs and would, therefore, minimize or obviate resort to the latter. Examples include: Drug free dances and parties; Outward Bound; Youth/adult leadership activities; Recreation activities; Community drop-in centers; Community service activities; and Other (Specify):	distinction between activities which center on legal and regulatory initiatives and those that rela service and action-oriented initiatives. Examples include: Promoting establishment/review of alcohol/tobacco/other drug policies in schools; Guidance and technical assistance to communities to monitor and maximize local enforcen procedures governing availability and distribution of alcohol, tobacco and other drug use; Modifying alcohol and tobacco advertising practices; Product pricing strategies; and Other (Specify):	
(4)	Problem Identification and Referral: This strategy aims at identification of those youth who have indulged in illegal/age-inArea Authority/County Programspropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs in order to assess if their behavior		

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Check (✓) One applicable 6 Month Report Period Below:Mid-Year Report: July 1, 2003 through December 31, 2003- I	Area Authority/County Program: Oue Date: 1/20/2004Year-	End Report: Jan. 1, 2004 through June	e 30, 2004 - Due Date: 7/20/2004
Section III: SAPTBG Primary Prevention Program Staff and W	ritten Program Plan APSM 30-1, T10: 14	V .4200 and .6900)	
A1 Signature and Name (Printed) of Designated Director of SA Primary A. SAPTBG PRIMARY PREVENTION PROGRAM STAFF B		Phone No. PREVENTION CERTIFICATION	ON STATUS:
Name and Position Title	Date Staff Began Work in this SAPTBG Primary Prevention Program Initiative	% of FTE Position Dedicated to SAPTBG Primary Prevention	NCSAPCB Certified as Prevention Specialist?
TOTAL FTE =			
B. WRITTEN PROGRAM PLAN FOR CONSULTATION ANI In order to strengthen SAPT Block Grant planning and accountability Program is requested to provide a <u>brief summary</u> below of Written Plan should specify substance abuse populations that will be targeted measurable objectives to be achieved. This Plan should include active Rule Section .4200. (APSM 30-1, 05/01/96 Revision)	y for the 20% Set-Aside for Substance Abuse n Program Plan highlights pertaining to su l in the coming fiscal year (including those H	ibstance abuse populations, obje ligh-Risk groups identified in Page	ctives, and activities. This 2 of this report), and identify
[FOR REPORT DUE IN JANUARY ONLY] 1. Please provide a objectives, and activities.	<u>brief summary</u> below of Written Plan higl	hlights pertaining to substance a	buse at risk populations,
2. [FOR REPORT DUE IN JANUARY ONLY] Attach a copy of MH/DD/SAS Licensure Rule Section .6900.	f the current annual Written Program Pla	an for Consultation and Education	on Services as described in
DMII/DD/CAC CAC Caction			Paying as of July 2002

DMH/DD/SAS – SAS Section – Page 8 of 15 SAMHSA: 45 CFR Part 96, March 31, 1993

Check (✓) One applicable 6 Month Report Period Below: Area Authority/County Program Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date: 1/20/2004 Year	n: ear-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/2004
Section IV: SAPTBG Activities for Reducing Youth Access to Tobacco Products Initiative (Synar Amer	ndment)
A1. Signature and Name (Printed) of Designated Liaison for Reducing Youth Access to Tobacco Products	Phone No.
A2. SFY 03-04 Performance Agreement Measure: Demonstrate area authority/county program leader	ship to insure local community implementation of Synar

Amendment provisions towards Reducing Youth Access to Tobacco Products and provide a minimum of 8 hours per month of Substance Abuse C, E, and PP Services specifically directed towards Youth Access Community Collaboration, Merchant Education, and Law Enforcement-Related activities. Maintain appropriate event documentation through a standardized reporting format for program audit purposes, including event date, time, provider(s), target audience, methods, and results.

SAPTBG SYNAR AMENDMENT ACTIVITIES	Jul	Aug	Sep	Oct	Nov	Dec	6	Jan	Feb	Mar	Area	May	Jun	6	12
COMPLETED BY SFY 03-04	2003	2003	2003	2003	2003	2003	Mo.	200	2004	200	Author	2004	2004	Mo	Mo
(The Area Authority/County Programs are encouraged to attach							Sub-	4		4	ity/Co			•	•
a narrative of additional information regarding specific							Tot.				unty			Su	Tot
activities).											Progra			b-	
,											ms			Tot	
											2004				
1. COMMUNITY COLLABORATION															
a. Identification of Community Partners: Identified															
and determined the level of interest and involvement of															
community partners who share the goal of reducing youth															
access to tobacco products.															
b. Community Leadership: Took the lead in pulling															
together community partners to develop strategies to reduce															
access in the area your program served.															
c. Group Participation: Participated with an existing															
group that is collaborating on the issue of reducing youth access															
to tobacco products in the area served.															
d. Community Education: Provided information on															
youth access (i.e. laws, penalties) to youth organizations and															
community groups to educate and actively involve them in															
efforts to reduce youth access to tobacco products.															
2. MERCHANT EDUCATION															

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Check (✓)	One applicable 6 Month Report Period Below:	Area Authority/County Pro	gram:		
	_Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date:	1/20/2004	Year-End Report: .	Jan. 1, 2004 through June 30, 2004 -	Due Date: 7/20/200

SAPTBG SYNAR AMENDMENT ACTIVITIES	Jul	Aug	Sep	Oct	Nov	Dec	6	Jan	Feb	Mar	Area	May	Jun	6	12
COMPLETED BY SFY 03-04	2003	2003	2003	2003	2003	2003	Mo.	200	2004	200	Author	2004	2004	Mo	Mo
(The Area Authority/County Programs are encouraged to attach							Sub-	4		4	ity/Co				•
a narrative of additional information regarding specific							Tot.				unty			Su	Tot
activities).											Progra			b-	•
											ms 2004			Tot	
a. Identification of Tobacco Retail Outlets:											2004			•	
Determined the no. and location of all tobacco retail outlets															
including over-the-counter & vending machines in the area															
served.															
b. Merchant Education: Contacted tobacco retail outlets															
in your area to ensure that they have received specific															
information on their responsibilities and on the penalties for															
violation of state and federal youth access laws. c. Merchant Education: Collaborated with															
community/youth groups to visit tobacco retail outlets in your															
area to provide information and materials (i.e. brochures, signs)															
on state youth access law.															
3. LAW ENFORCEMENT-RELATED															
a. Promote Local Law Enforcement: Contacted															
officers from your local police or sheriffs' departments to															
promote increased enforcement of youth access laws.															
b. Promote Model for Success: Encouraged local law enforcement to implement the Model for Success Program															
incorporating merchant education and enforcement of the state															
vouth access law.															
c. Assistance in Implementation of Model for Success:															
Assisted local law enforcement/ALE officers in the															
implementation of the Model for Success Program by															
participating in any of the following tasks: (Note: Block Grant															
Funds may not be used for actual enforcement activities.)															<u> </u>
Development of a comprehensive list of all retail															
tobacco outlets															
Recruitment and age testing of youth for an															
enforcement operation															
 Serving as an adult observer or monitor during an 															<u> </u>

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SAPTBG SYNAR AMENDMENT ACTIVITIES COMPLETED BY SFY 03-04 (The Area Authority/County Programs are encouraged to attach a narrative of additional information regarding specific activities).	Jul 2003	Aug 2003	Sep 2003	Oct 2003	Nov 2003	Dec 2003	6 Mo. Sub- Tot.	Jan 200 4	Feb 2004	Mar 200 4	Area Author ity/Co unty Progra ms	May 2004	Jun 2004	6 Mo Su b- Tot	12 Mo Tot
enforcement operation											2004			•	
Provision of incentives for clerks who don't sell tobacco products to minors during enforcement operations															
 Provision of refreshments and/or incentives to youth volunteers 															
 Assist in coordination of a merchant education workshop with local retailers 															
4. MEDIA/PUBLIC RELATIONS															
a. Collaborated with community partners to include news stories, letters to the editor, etc. to heighten awareness of youth access to tobacco products.															
b. Collaborated with community/youth organizations to conduct a Merchant Pledge Campaign and publicized results to recognize merchants and clerks who have pledged not to sell tobacco products to minors.															
TOTAL															
A3. [FOR REPORTS DUE IN JANUARY AND JULY] Please explain any discrepancy between Performance Agreement activities and actual hours reported above.	measure	of an a	verage	minimu	m of 8 h	ours pe	r month	(48 ho	urs per s	six mor	nth reporti	ng perio	d) on S	ynar re	lated

Section V: Priority Admission Preference for Pregnant Injecting Drug Users, Pregnant Women and Injecting Drug Users

Check	(One applicable 6 Month Report Period Below: Area Authority/County Program: Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date: 1/20/2004 Year-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/2004
A.	Describe your adult and child program policies and practices assuring priority admission preference for all substance abuse individuals who meet federally defined special population criteria, including pregnant injecting drug users , pregnant women , and injecting drug users . (Attach copies of additional relevant supporting documents.)
В.	Document evidence of satisfactory efforts to advertise and publicize priority admission policies in the current fiscal year assuring admission to these clients. (Attach copies of additional relevant supporting documents.)

Section VI: Universal TB Screening, Testing, Referral & Case Management Services, & Health Department MOA

	SFY 2003-2004 Semi-Annual Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Compliance Report
Check	(One applicable 6 Month Report Period Below: Area Authority/County Program: Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date: 1/20/2004 Year-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/2004
A.	Describe your adult and child program policies and practices assuring universal TB screening for all substance abuse clients. Indicate the specific type of services and documentation location in each client's record for program audit purposes. (Attach copies of additional relevant supporting documents.)
В.	Describe appropriate TB Testing, Referral and Case Management Services for individuals identified as high-risk individuals for TB. (Attach copies of additional relevant supporting documents.)
C.	Does your Area Authority/County Program have a Memorandum of Agreement with the local health department pertaining to TB Services?
[FOR I	REPORT DUE IN JANUARY ONLY] If "Yes", please attach the most recent fiscal year MOA. If "No", please describe your plans to address this requirement.
(To be	a VII: Communicable Disease Risk Services for Injecting Drug Users & Those Clients Assessed At Risk for TB or HIV completed only by those 11 programs receiving specialized funding for Communicable Disease Risk/Narcotic Addiction and/or HIV Early Intervention Services as 1: 1) Blue Ridge, 2) Mecklenburg (McLeod), 3) Piedmont, 4) Crossroads, 5) CenterPoint (Step One), 6) Guilford (ADS), 7) Durham, 8) Wake (Southlight), 9) Neuse, 10)

DMH/DD/SAS - SAS Section -

CEV 2002 2004 C.

	SF 1 2005-2004 Semi-Annual Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Compitance Report
Check —	(\checkmark) One applicable 6 Month Report Period Below: Area Authority/County Program: Mid-Year Report: July 1, 2003 through December 31, 2003- Due Date: 1/20/2004Year-End Report: Jan. 1, 2004 through June 30, 2004 - Due Date: 7/20/2004
Pitt, an	d 11) Southeastern Area (Coastal Horizons).
A.	Describe your program policies and practices that assure client admission within 14 days of request for services, or if at capacity, within 120 days of request for services, and provision of interim services within 48 hours of request for services. (Attach copies of additional relevant supporting documents.)
В.	Describe HIV referral, pre-test counseling, testing, and post-test counseling services. (Attach copies of additional relevant supporting documents.)
<u>D.</u>	Describe 111 v Teletral, pre-test counseling, testing, and post-test counseling services. (Attach copies of additional relevant supporting documents.)
C.	Does your area authority/county program have a Memorandum of Agreement with the local health department pertaining to HIV Services?
[FOR	REPORT DUE IN JANUARY ONLY] If "Yes", please attach the most recent fiscal year MOA. If "No", please describe your plans to address this requirement.

Attachment 5 FISCAL MANAGEMENT 2 SFY 2003-2004 Semi-Annual Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Compliance Report

Mid-Year Report: July 1, 2003 through December	31, 2003- Due Date: 1	Area Authority/County 1/20/2004	Year-End Report:	Jan. 1, 2004 through June 30, 2004	- Due Date: 7/20/2004					
Section VIII: Signatures of Personnel Responsible for	SAPTRG Complia	nce								
The undersigned persons hereby attest to the accuracy and	d completeness of the	e information provided i	n this report:							
A1. Area Director/CEO Signature:	_ Date:	_ A2. Finance Offic	er Signature:	Date:						
A3. Adult SA Director Signature: Da	ite:	A4. Child and Adolesc	ent SA Director:	Date:						

All signatures are **REQUIRED** for form to be considered complete for Performance Agreement. Please sign legibly.

We would appreciate your report submissions with original signatures either via a hard copy or through electronic submission with appropriate signatures by January 20, 2004 and July 20, 2004. Items sent by Federal Express or UPS must be addressed to 325 North Salisbury Street, Suite 688, Albemarle Building, Raleigh, NC 27603, telephone (919) 733-0696.

For any Area Authority/County Program that is interested, a WORD format version of this report can be sent to you electronically as an E-Mail attachment, or the report can be mailed to you on a disk.

If you have any questions about the report content, format, or requirements, please do not hesitate to have your staff contact the designated contact.

Thank you in advance for your assistance in completing this request.